



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appn. Of: SUBRAMANIAN et al.

Serial No.: 10/039,486

Filed: November 9, 2001

For: Component User Interface Management

Group: 2173

Examiner: Bonshock, Dennis G.

DOCKET: GSH 08-892801

MAIL STOP AMENDMENTS

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT A

Dear Sir:

This Amendment is being filed in response to the Official Action mailed July 2, 2004.

A Petition For One Month Extension of Time accompanies this Amendment.

Please amend the Application as follows:

Amendments to the Claims begin on page 2 of this Amendment.

Remarks/Arguments begin on page 10 of this Amendment.

11/02/2004 SZENDIE1 00000041 10039486

01 FC:1202 126.00 OP

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01 FC:1201 176.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

Application or Docket Number

65H08-592801

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	16	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	16 minus 20 = *	
INDEPENDENT CLAIMS	7 minus 3 = *	4
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	Fee
BASIC FEE	370.00
OR X\$ 9=	BASIC FEE 740.00
OR X42=	X\$18=
OR +140=	X84=
TOTAL	+280=
OR TOTAL	

CLAIMS AS AMENDED - PART II

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* 27	Minus	** 20 = 7
Independent	* 9	Minus	*** 7 = 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY	OTHER THAN OR SMALL ENTITY
RATE	ADDI- TIONAL FEE
X\$ 9=	X\$18= 126
X42=	X84= 176
+140=	+280=
TOTAL ADDT. FEE	TOTAL ADDT. FEE 302

BEST AVAILABLE COPY

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

AMENDMENT B	ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	X\$18=	
X42=	X84=	
+140=	+280=	
TOTAL ADDT. FEE	TOTAL ADDT. FEE	

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

AMENDMENT C	ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	X\$18=	
X42=	X84=	
+140=	+280=	
TOTAL ADDT. FEE	TOTAL ADDT. FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.